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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS		
Case number (if known)	Chapter you are filing under:	
	☐ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	■ Chapter 13	☐ Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	rt 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport).	Tina First name M.	First name
	Bring your picture identification to your meeting with the trustee.	Middle name Brasher Last name and Suffix (Sr., Jr., II, III)	Middle name Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years	•	
	Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-7518	

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Case number (if known)

Debtor 1 Tina M. Brasher

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):			
4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years		■ I have not used any business name or EINs.	☐ I have not used any business name or EINs.			
	Include trade names and doing business as names	Business name(s)	Business name(s)			
		EINs	EINs			
5.	Where you live	F707 Massaure In Britis	If Debtor 2 lives at a different address:			
		5727 Mayapple Drive Loves Park, IL 61111 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code			
		Winnebago	Nambor, otrock, only, otato a 211 occur			
		County	County			
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.			
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code			
6.	Why you are choosing this district to file for	Check one:	Check one:			
bankruptcy		Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.			
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)			

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Case number (if known) Debtor 1 Tina M. Brasher

Par	t 2: Tell the Court About	Your E	3ankruptcy Ca	se				
7.	The chapter of the Bankruptcy Code you are				of each, see <i>Notice</i> of page 1 and check the		S.C. § 342(b) for Individuals Filing	for Bankruptcy
	choosing to file under	☐ Chapter 7						
			Chapter 11					
			Chapter 12					
			Chapter 13					
3.	How you will pay the fee I will pay the entire fee when I file my petition. F about how you may pay. Typically, if you are paying order. If your attorney is submitting your payment of a pre-printed address.					ng the fee yoursel	f, you may pay with cash, cashier's	s check, or money
					stallments. If you cho		gn and attach the Application for In	dividuals to Pay
			I request that but is not requapplies to you	t my fee be w uired to, waive ur family size a	aived (You may requivelyour fee, and may do nd you are unable to	est this option only so only if your inc pay the fee in insta	r if you are filing for Chapter 7. By I come is less than 150% of the offici allments). If you choose this option orm 103B) and file it with your petit	ial poverty line that , you must fill out
			пе Аррисано	iii to nave tile	Chapter 7 Filling Fee	waived (Official FC	omi 1036) and me it with your petit	ion.
9.	Have you filed for bankruptcy within the	■ N						
	last 8 years?	ПΥ						
			District		Whe	-		
			District		Whe		Case number	
			District		Whe	n	Case number	
10.	Are any bankruptcy cases pending or being	■ N	lo					
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	ΠY	es.					
			Debtor				Relationship to you	
			District		Whe	n	Case number, if known	
			Debtor				Relationship to you	
			District		Whe	n	Case number, if known _	
11.	Do you rent your residence?	■ N	lo. Go to li	ne 12.				
	residence:	ПΥ	es. Has yo	ur landlord obt	ained an eviction judo	gment against you	and do you want to stay in your re	sidence?
				No. Go to line	12.			
				Yes. Fill out <i>II</i> bankruptcy pe		t an Eviction Judgr	ment Against You (Form 101A) and	file it with this

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Debtor 1	Tina M. Brasher	Document	Page 4 of 58	Case number (if known)	

Part	Report About Any Bu	sinesses	You Own	as a Sole Propriet	or	
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.		
		☐ Yes.	Name	and location of busi	ness	
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name	of business, if any		
	If you have more than one sole proprietorship, use a separate sheet and attach		Numb	er, Street, City, Stat	e & ZIP Code	
	it to this petition.		Check	Check the appropriate box to describe your business:		
				Health Care Busin	ess (as defined in 11 U.S.C. § 101(27A))	
				Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))	
				efined in 11 U.S.C. § 101(53A))		
				Commodity Broker	(as defined in 11 U.S.C. § 101(6))	
				None of the above		
13. Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor? If you are filing under Chapter 11, the court must know whether you are a small business debtor so that deadlines. If you indicate that you are a small business debtor, you must attach your most recent balar operations, cash-flow statement, and federal income tax return or if any of these documents do not exist the property of the second			a small business debtor, you must attach your most recent balance sheet, statement of			
	For a definition of small	■ No.	I am r	ot filing under Chap	ter 11.	
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.			
		☐ Yes.	I am f	ling under Chapter	1 and I am a small business debtor according to the definition in the Bankruptcy Code.	
Part	4: Report if You Own or	Have Any	Hazardo	us Property or Any	Property That Needs Immediate Attention	
14.	Do you own or have any	■ No.				
	property that poses or is alleged to pose a threat of imminent and	■ No. ☐ Yes.	What is	the hazard?		
	identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?			iate attention is why is it needed?		
For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?			Where is	the property?	Number, Street, City, State & Zip Code	

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Debtor 1 Tina M. Brasher

Part 5:

Brasher Case number (if known)

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

Explain Your Efforts to Receive a Briefing About Credit Counseling

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

 □ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Deb	tor 1 Tina M. Brasher		Docum	Case nui	mber (if known)		
Part	6: Answer These Quest	ions for Re _l	porting Purposes				
16.	What kind of debts do you have?	16a. i	a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."				
		1	☐ No. Go to line 16b.				
			Yes. Go to line 17.				
				business debts? Business debts are devestment or through the operation of the			
		I	☐ No. Go to line 16c.				
		I	☐ Yes. Go to line 17.				
		16c.	State the type of debts you	owe that are not consumer debts or bus	iness debts		
17.	Are you filing under Chapter 7?	■ No.	am not filing under Chapte	er 7. Go to line 18.			
	Do you estimate that after any exempt			. Do you estimate that after any exempt payailable to distribute to unsecured credit	property is excluded and administrative expenses ors?		
	property is excluded and administrative expenses	[□ No				
	are paid that funds will be available for		□Yes				
	distribution to unsecured creditors?						
18.	How many Creditors do	1 -49		□ 1,000-5,000	□ 25,001-50,000		
	you estimate that you	■ 1-49 □ 50-99		□ 5001-10,000	☐ 50,001-100,000		
	owe?	□ 100-199	Э	□ 10,001-25,000	☐ More than100,000		
		200-999	9				
19.	How much do you	□ \$0 - \$50	0,000	☐ \$1,000,001 - \$10 million	□ \$500,000,001 - \$1 billion		
	estimate your assets to be worth?		1 - \$100,000	□ \$10,000,001 - \$50 million	☐ \$1,000,000,001 - \$10 billion		
			01 - \$500,000	□ \$50,000,001 - \$100 million	□ \$10,000,000,001 - \$50 billion		
		\$500,00	01 - \$1 million	□ \$100,000,001 - \$500 million	☐ More than \$50 billion		
20.	How much do you	□ \$0 - \$50		☐ \$1,000,001 - \$10 million	☐ \$500,000,001 - \$1 billion		
	estimate your liabilities to be?		1 - \$100,000	\$10,000,001 - \$50 million	\$1,000,000,001 - \$10 billion		
			01 - \$500,000	□ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million	\$10,000,000,001 - \$50 billion		
		□ \$500,00	01 - \$1 million	□ \$100,000,001 - \$500 million	☐ More than \$50 billion		
Part	7: Sign Below						
For	you	I have exa	mined this petition, and I d	eclare under penalty of perjury that the in	formation provided is true and correct.		
				r 7, I am aware that I may proceed, if eligi e relief available under each chapter, and	ble, under Chapter 7, 11,12, or 13 of title 11, I choose to proceed under Chapter 7.		
				d not pay or agree to pay someone who is the notice required by 11 U.S.C. § 342(b)			
		I request re	elief in accordance with the	e chapter of title 11, United States Code,	specified in this petition.		
		bankruptcy and 3571.	case can result in fines up		ey or property by fraud in connection with a 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519,		
			M. Brasher	Signature of De	ahtor 2		
		Tina M. E Signature		Signature of De	SUICI Z		
		Executed of	on May 15, 2017	Executed on			
			MM / DD / YYYY		MM / DD / YYYY		

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Debtor 1 Tina M. Brasher Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Daniel	A. Springer	Date	May 15, 2017
Signature of	Attorney for Debtor		MM / DD / YYYY
Daniel A. S	Springer		
Springer L	aw Firm		
Firm name			
2222 E Sta	ate St		
Suite 107			
Rockford,	IL 61104		
Number, Street,	City, State & ZIP Code		
Contact phone	815.312.4725	Email address	dspringerlaw@gmail.com
6314059			
Parnumbar 9 C	toto		

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		THE FAUL OF JO	
rmation to identify your	case:		
Tina M. Brasher			
First Name	Middle Name	Last Name	
First Name	Middle Name	Last Name	
ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
	Tina M. Brasher First Name	Tina M. Brasher First Name Middle Name First Name Middle Name	Tina M. Brasher First Name Middle Name Last Name First Name Middle Name Last Name

☐ Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

rar	t 1: Summarize Your Assets		
			assets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	102,430.0
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	34,600.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	137,030.0
Par	t 2: Summarize Your Liabilities		
			iabilities nt you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	127,861.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.0
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	26,238.00
	Your total liabilities	\$	154,099.00
Par	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	3,170.92
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	2,752.00
Par	4: Answer These Questions for Administrative and Statistical Records		
ô.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ır other sc	hedules.
7.	■ Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.	a personal	, family, or

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

page 1 of 2

the court with your other schedules.

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8.	From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR , Form 122B Line 11; OR , Form 122C-1 Line 14.	\$ 4,169.52

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Tota	al claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$_	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$_	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$_	0.00
9d. Student loans. (Copy line 6f.)	\$_	10,119.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$_	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$_	0.00
9g. Total. Add lines 9a through 9f.	\$	10,119.00

rmation to identify yo Tina M. Brasho	our case and th	Document is filing:	Page 10 of 58		
Tina M. Brash					
First Name	er Middle	Name	Last Name		
First Name			Last Name		
ankruptov Court for th	o. NODTHED	NI DISTRICT OF	II I INOIS		
ankrupicy Court for th	e. NORTHER	N DISTRICT OF	ILLINOIS		
					Check if this is ar amended filing
separately list and des Be as complete and according space is needed, attestion. The Each Residence, Build thave any legal or equitant 2.	cribe items. List a curate as possible ach a separate sh ding, Land, or Oth	e. If two married p neet to this form. (her Real Estate Yo	eople are filing together, both On the top of any additional pa ou Own or Have an Interest In	are equally responsible ages, write your name a	e for supplying correct
	otion	Single-fa	amily home	the amount of any	ured claims or exemptions. Put secured claims on Schedule D: ve Claims Secured by Property.
State	61111-0000 ZIP Code	Manuface Land Investme Timesha Other Who has an int Debtor 1 Debtor 1 At least of	ent property re terest in the property? Check or only only and Debtor 2 only	Describe the nature (such as fee simple a life estate), if kn Fee simple Check if this (see instructions	portion you own? 0.00 \$102,430.00 ure of your ownership interest ole, tenancy by the entireties, or nown.
() r	Orm 106A/B ILE A/B: Pro , separately list and desible as complete and according space is needed, attestion. The Each Residence, Build art 2. The is the property? The property? The property of the prop	Orm 106A/B Ile A/B: Property Is a separate stems. List a separate stem and accurate as possible or space is needed, attach a separate stems in a separate stems. Ile Each Residence, Building, Land, or Otter have any legal or equitable interest in a separate stems in a separate s	Orm 106A/B ILE A/B: Property Is separately list and describe items. List an asset only once Be as complete and accurate as possible. If two married pore space is needed, attach a separate sheet to this form. One Each Residence, Building, Land, or Other Real Estate Your have any legal or equitable interest in any residence, building art 2. In the property? What is the property? What is the property in the property in a single farm in the property in the	Sankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS ORTM 106A/B DIE A/B: Property Is separately list and describe items. List an asset only once. If an asset fits in more than Be as complete and accurate as possible. If two married people are filing together, both ore space is needed, attach a separate sheet to this form. On the top of any additional prestion. The Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In report of the top of any additional prestion. What is the property? Check all that apply art 2. Is is the property? What is the property? Check all that apply apple Drive Is if available, or other description What is the property? Check all that apply apple or multi-unit building condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Check or Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Sankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS NORTHERN DISTRICT OF ILLINOIS

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here......

\$102,430.00

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

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7. Electronics

Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games

☐ No

Yes. Describe.....

4 TV's

8. Collectibles of value

Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles

■ No

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\$400.00

Case 17-81158 Filed 05/15/17 Entered 05/15/17 15:23:32 Document Page 12 of 58 Case number (if known) Debtor 1 Tina M. Brasher ☐ Yes. Describe..... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments ■ No ☐ Yes. Describe..... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment ☐ Yes. Describe..... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories □ No Yes. Describe..... \$500.00 Used clothing 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver ☐ Yes. Describe..... 13. Non-farm animals Examples: Dogs, cats, birds, horses ■ No ☐ Yes. Describe..... 14. Any other personal and household items you did not already list, including any health aids you did not list ☐ Yes. Give specific information..... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$1,600.00 for Part 3. Write that number here Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition ☐ Yes..... 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. ☐ No Institution name: Yes..... \$300.00 **Checking Account** Alpine Bank 17.1. 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts ■ No ☐ Yes..... Institution or issuer name:

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Case number (if known) Debtor 1 Tina M. Brasher 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture ■ No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. No ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans No ☐ Yes. List each account separately. Institution name: Type of account: 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others No Institution name or individual: ☐ Yes. 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) No Issuer name and description. ☐ Yes..... 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ■ No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ■ No ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses No ☐ Yes. Give specific information about them... Money or property owed to you? Current value of the portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you ☐ No Yes. Give specific information about them, including whether you already filed the returns and the tax years...... Tax Refund from 2016 \$3,700.00 **Federal**

29. Family support

Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement

☐ No

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Describe All Property You Own or Have an Interest in That You Did Not List Above

Part 7:

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				·	
_	Do you have other property of any kind you did not already Examples: Season tickets, country club membership No	y list?			
_	Yes. Give specific information				
54.	Add the dollar value of all of your entries from Part 7. Wri	ite that n	umber here		\$0.00
Part	8: List the Totals of Each Part of this Form				
55.	Part 1: Total real estate, line 2				\$102,430.00
56.	Part 2: Total vehicles, line 5		\$4,000.00	-	
57.	Part 3: Total personal and household items, line 15		\$1,600.00		
58.	Part 4: Total financial assets, line 36		\$29,000.00		
59.	Part 5: Total business-related property, line 45		\$0.00		
60.	Part 6: Total farm- and fishing-related property, line 52		\$0.00		
61.	Part 7: Total other property not listed, line 54	+	\$0.00		
62.	Total personal property. Add lines 56 through 61		\$34,600.00	Copy personal property total	\$34,600.00

Official Form 106A/B Schedule A/B: Property page 6

63. Total of all property on Schedule A/B. Add line 55 + line 62

\$137,030.00

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			III I AUC TO OLJO	
Fill in this infor	mation to identify your	case:		
Debtor 1	Tina M. Brasher			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1:	Identify	the /	Property	You	Claim	as	Exempt
---------	----------	-------	-----------------	-----	-------	----	--------

 Which set of exemptions are you claiming? Check one only, even if your spouse is filing with 	. W	Vhich set of exem	ptions are vou claimi	ıa?	Check one only	. even if	vour spouse	is filina	with v	oυ.
--	-----	-------------------	-----------------------	-----	----------------	-----------	-------------	-----------	--------	-----

- You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
\$102,430.00		\$15,000.00	735 ILCS 5/12-901
		100% of fair market value, up to any applicable statutory limit	
\$3,500.00		\$2,400.00	735 ILCS 5/12-1001(c)
		100% of fair market value, up to any applicable statutory limit	
\$3,500.00		\$1,100.00	735 ILCS 5/12-1001(b)
		100% of fair market value, up to any applicable statutory limit	
\$500.00		\$500.00	735 ILCS 5/12-1001(b)
		100% of fair market value, up to any applicable statutory limit	
\$700.00		\$700.00	735 ILCS 5/12-1001(b)
		100% of fair market value, up to any applicable statutory limit	
	\$3,500.00 \$500.00	\$3,500.00 \$500.00 \$700.00	\$102,430.00 \$102,430.00 \$100% of fair market value, up to any applicable statutory limit \$3,500.00 \$100% of fair market value, up to any applicable statutory limit \$3,500.00 \$100% of fair market value, up to any applicable statutory limit \$1,100.00 \$100% of fair market value, up to any applicable statutory limit \$500.00 \$500.00 \$700.00 \$700.00 \$100% of fair market value, up to any applicable statutory limit

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Case number (if known)

De	IIIIa IVI. DI aSITEI			Case number (ii known)	
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
	4 TV's Line from Schedule A/B: 7.1	\$400.00		\$400.00	735 ILCS 5/12-1001(b)
				100% of fair market value, up to any applicable statutory limit	
	Used clothing Line from Schedule A/B: 11.1	\$500.00		\$500.00	735 ILCS 5/12-1001(a)
	Line nom concede 772. TTT			100% of fair market value, up to any applicable statutory limit	
	Checking Account: Alpine Bank Line from Schedule A/B: 17.1	\$300.00		\$300.00	735 ILCS 5/12-1001(b)
	Line Horr Schedule A/B. 1111			100% of fair market value, up to any applicable statutory limit	
	Federal: Tax Refund from 2016 Line from Schedule A/B: 28.1	\$3,700.00		\$1,000.00	735 ILCS 5/12-1001(b)
	Line Horr Schedule A.D. 20.1			100% of fair market value, up to any applicable statutory limit	
	Child Support: Back Due Child support	\$25,000.00		\$25,000.00	735 ILCS 5/12-1001(g)(4)
	Line from Schedule A/B: 29.1			100% of fair market value, up to any applicable statutory limit	
3.	Are you claiming a homestead exemption (Subject to adjustment on 4/01/19 and every			led on or after the date of adjustmer	nt.)
	■ No	•		,	
	☐ Yes. Did you acquire the property cove	red by the exemption w	ithin 1	,215 days before you filed this case	?
	□ No				
	☐ Yes				

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		Document	Page 1	8 of 58		
Fill in this inform	nation to identify you	ır case:				
Debtor 1	Tina M. Brashei					
Debior 1	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse if, filing)	First Name	Middle Name	Last Name			
United Ctates Dan	olementos Court for the	NORTHERN DISTRICT OF ILL	INOIS			
United States Bar	hkruptcy Court for the	NORTHERN DISTRICT OF ILI	LINOIS			
Case number						
(if known)					☐ Check	if this is an
					amend	led filing
Official Form	<u> 106D</u>					
Schedule	D: Creditors	Who Have Claims	Secure	d by Property	ı	12/15
					*	
		If two married people are filing togeth				
number (if known).	Additional Page, fill it	out, number the entries, and attach it	to this form. C	on the top of any addition	iai pages, write your na	ne and case
` '	have claims secured by	v vour property?				
<u> </u>		his form to the court with your other	r cobodulos N	You have nothing also to	roport on this form	
_		•	scriedules.	Tou have nothing else to	report on this form.	
■ Yes. Fill in	all of the information	below.				
Part 1: List All	I Secured Claims					
2. List all secured of	claims. If a creditor has	more than one secured claim, list the cre	editor separatel	Column A	Column B	Column C
for each claim. If mo	ore than one creditor has	a particular claim, list the other creditor	s in Part 2. As	Amount of claim	Value of collateral	Unsecured
much as possible, lis	st the claims in alphabeti	cal order according to the creditor's nam	ne.	Do not deduct the value of collateral.	that supports this claim	portion If any
a. Illinois De	partment of			value of collatoral.	Oldini	
2.1 Revenue	_	Describe the property that secures	the claim:	\$3,500.00	\$102,430.00	\$3,500.00
Creditor's Name		5727 Mayapple Drive Loves	Park, IL			
		61111 Winnebago County				
	ruptcy Dept.	As of the date you file, the claim is:	Chock all that			
PO Box 64		apply.	Check all that			
Chicago, I	L 60664	☐ Contingent				
Number, Street,	City, State & Zip Code	☐ Unliquidated				
		☐ Disputed				
Who owes the del	bt? Check one.	Nature of lien. Check all that apply.				
Debtor 1 only		☐ An agreement you made (such as	mortgage or se	ecured		
Debtor 2 only		car loan)				
☐ Debtor 1 and De	btor 2 only	☐ Statutory lien (such as tax lien, me	echanic's lien)			
☐ At least one of the	e debtors and another	☐ Judgment lien from a lawsuit				
☐ Check if this cla		Other (including a right to offset)	Tax Lien			
community del	ot					
Date debt was incu	rred 5/13/2013	Last 4 digits of account num	ber			
Rock Rive	r Water					
2.2 Reclamati		Describe the property that secures	the claim:	Unknown	\$102,430.00	Unknown
Creditor's Name		5727 Mayapple Drive Loves	Park. IL			
		61111 Winnebago County	,			
Attn: Bank	ruptcy Dept.					
3333 Kish	waukee St.	As of the date you file, the claim is: apply.	Check all that			
Rockford,	IL 61109	Contingent				
Number, Street,	City, State & Zip Code	☐ Unliquidated				
		☐ Disputed				
Who owes the del	bt? Check one.	Nature of lien. Check all that apply.				
Debtor 1 only		☐ An agreement you made (such as	mortgage or se	ecured		
Debtor 2 only		car loan)				
Debtor 1 and De	btor 2 only	■ Statutory lien (such as tax lien, me	chanic's lien)			
☐ At least one of th	e debtors and another	☐ Judgment lien from a lawsuit				
Check if this cla		Other (including a right to effect)				

community debt

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Debt	or 1 Tina M. Bras	her			Case number (if know)		
	First Name	Middle Na	ame Last Name				
Date	debt was incurred 1	/4/2017	Last 4 digits of account	number			
2.3	Rushmore Loan Management Ser Creditor's Name	rvices	Describe the property that sec 5727 Mayapple Drive Lo 61111 Winnebago Cour	ves Park, IL	\$124,361.00	\$102,430.00	\$21,931.00
	PO Box 52708 Irvine, CA 92619 Number, Street, City, State	e & Zip Code	As of the date you file, the clair apply. Contingent Unliquidated Disputed				
Who	owes the debt? Ched	ck one.	Nature of lien. Check all that ap	oply.			
De De	ebtor 1 only ebtor 2 only ebtor 1 and Debtor 2 on eleast one of the debtor heck if this claim relat ommunity debt	s and another	■ An agreement you made (succar loan) □ Statutory lien (such as tax lied □ Judgment lien from a lawsuit □ Other (including a right to offs	n, mechanic's lien)	ıred		
Date	debt was incurred 1	/28/2009	Last 4 digits of account	number			
lf th Wri	nis is the last page of y te that number here:	your form, add	olumn A on this page. Write that the dollar value totals from all pa r a Debt That You Already Li	ages.	\$127,861. \$127,861.		
trying than	to collect from you fo	or a debt you or f the debts that	e notified about your bankruptcy we to someone else, list the crec you listed in Part 1, list the addi is page.	ditor in Part 1, and the	en list the collection age	ncy here. Similarly, if ye	ou have more
	Name, Number, Stree Codilis & Assoc 15W030 N. Fron Burr Ridge, IL 6	iates tage Road	Zip Code		n line in Part 1 did you ente	or the creditor? 2.3	
	Name, Number, Stree GMAT Legal Titl 60 Livingston A EP-MN-WS3D Saint Paul, MN §	le Trust 2014 venue			n line in Part 1 did you ente		
	Name, Number, Stree Illinois Departm Lien Unit PO Box 19035 Springfield, IL 6	ent of Reve			n line in Part 1 did you ente		
	Name, Number, Stree Winnebago Cou 400 W State St 2016 CH 794 Rockford, IL 611	inty Circuit (n line in Part 1 did you ente		

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Fill in th	nis information to identif		AAAAAAA			
Debtor 1	Tina M. Bra	shor				
Debtor	First Name	Middle Name	9	Last Name		
Debtor 2						
(Spouse if,	filing) First Name	Middle Name	3	Last Name		
United S	States Bankruptcy Court fo	or the: NORTHERN D	DISTRICT OF ILL	INOIS		
Case nu	ımber					
(if known)						Check if this is an
					a	mended filing
Officia	al Form 106E/F					
	dule E/F: Credito	rs Who Have II	Insecured	Claims		12/15
				Y claims and Part 2 for creditors with NO	NIPPIOPITY clai	
Schedule Schedule left. Attac	G: Executory Contracts and D: Creditors Who Have Claim	d Unexpired Leases (Offic ims Secured by Property.	ial Form 106G). D If more space is r	st executory contracts on Schedule A/B o not include any creditors with partially needed, copy the Part you need, fill it ou oort in a Part, do not file that Part. On the	y secured claims it, number the en	that are listed in tries in the boxes on the
Part 1:	List All of Your PRIOR	RITY Unsecured Claims	<u>; </u>			
1. Do a	ny creditors have priority u	nsecured claims against y	ou?			
■ N	lo. Go to Part 2.					
ΠY	es.					
Part 2:	List All of Your NONP	RIORITY Unsecured CI	laims			
3. Do a	ny creditors have nonpriori	ty unsecured claims agair	ıst you?			
□N	lo. You have nothing to report	in this part. Submit this forr	n to the court with	your other schedules.		
■ Y	es.					
1 list	all of your poppriority upso	cured claims in the alphab	notical order of th	e creditor who holds each claim. If a cre	ditar has more tha	un ana nannriarity
unse	cured claim, list the creditor sone creditor holds a particular	eparately for each claim. Fo	or each claim listed	identify what type of claim it is. Do not list lave more than three nonpriority unsecured	claims already inc	cluded in Part 1. If more
						Total claim
4.1	AT&T	La	ast 4 digits of acco	ount number		\$100.00
	Nonpriority Creditor's Name		-			
	PO Box 6416		hen was the debt	incurred?		-
	Carol Stream, IL 6019 Number Street City State Zlp		s of the date you f	ile, the claim is: Check all that apply		
	Who incurred the debt? Che			,		
	Debtor 1 only		Contingent			
	Debtor 2 only] Unliquidated			
	Debtor 1 and Debtor 2 onl] Disputed			
	☐ At least one of the debtors	_	-	ITY unsecured claim:		
	☐ Check if this claim is for		Student loans			
	debt Is the claim subject to offse		Obligations arisin	g out of a separation agreement or divorce	that you did not	
	No			ทร or profit-sharing plans, and other similar de	ebts	
	☐ Yes		Other. Specify	· ·	-	
	- 163	_	other. Specify _	J		=

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Case number (if know) Debtor 1 Tina M. Brasher 4.2 Chase Bank USA Last 4 digits of account number \$2.548.00 Nonpriority Creditor's Name Attn: Bankruptcy Dept. When was the debt incurred? PO Box 15298 Wilmington, DE 19850 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Credit Card Purchases ☐ Yes 4.3 **Chase Bank USA** Last 4 digits of account number \$924.00 Nonpriority Creditor's Name When was the debt incurred? Attn: Bankruptcy Dept. PO Box 15298 Wilmington, DE 19850 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes **Credit Card Purchases** Other. Specify 4.4 **Citizens Finance** Last 4 digits of account number \$3,571.00 Nonpriority Creditor's Name When was the debt incurred? Attn: Bankruptcy Dept. 6457 N 2nd St Loves Park, IL 61111 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Auto Deficiency

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Case number (if know)

Cortrust Bank	Last 4 digits of account number	\$1,219.00
Nonpriority Creditor's Name PO Box 7030 Mitchell, SD 57301	When was the debt incurred?	
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other Specify Credit Card Purchases	
Harlem Consolidated School	Lost 4 digite of account number	\$50.00
District Nonpriority Creditor's Name	Last 4 digits of account number	ψ30.00
8605 N. 2nd Street Machesney Park, IL 61115	When was the debt incurred?	
Number Street City State ZIp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Fees	
Heights Finance Corporation	Last 4 digits of account number	\$399.00
Nonpriority Creditor's Name Attn: Bankruptcy Dept. 5301 E. State Street #111	When was the debt incurred?	
Rockford, IL 61108 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	As of the date you me, the claim is. Oneck an that appry	
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	■ Other. Specify Personal Loan	

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Case number (if know) Debtor 1 Tina M. Brasher 4.8 **HSBC Bank** Last 4 digits of account number \$1.496.00 Nonpriority Creditor's Name Attn: Bankruptcy Dept. When was the debt incurred? PO Box 9 Buffalo, NY 14240 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes 4.9 **Illinois Tollway** Last 4 digits of account number \$1,000.00 Nonpriority Creditor's Name When was the debt incurred? Attn: Bankruptcy Dept. 2700 Ogden Ave Downers Grove, IL 60515 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Tolls Other. Specify 4.1 **Navient** \$10,119.00 Last 4 digits of account number Nonpriority Creditor's Name PO Box 9635 When was the debt incurred? Wilkes Barre, PA 18773 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed ☐ Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No \square Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify **Student Loans**

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Case number (il kilow)	
Last 4 digits of account number	\$271.00
When was the debt incurred?	,
As of the date you file, the claim is: Check all that apply	
-	
☐ Unliquidated	
Disputed	
<u></u>	
■ Other Specify Medical Services	
Last 4 digits of account number	\$1,085.00
When was the debt incurred?	
As of the date you file the claim is: Check all that apply	
As of the date you me, the claim is. Check all that apply	
☐ Contingent	
☐ Unliquidated	
☐ Disputed	
Type of NONPRIORITY unsecured claim:	
☐ Student loans	
Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
☐ Debts to pension or profit-sharing plans, and other similar debts	
Other. Specify Medical Bills	
Last 4 digits of account number	\$979.00
When was the debt incurred?	
As of the data were file the state of the st	
As of the date you file, the claim is: Check all that apply	
Contingent	
•	
<u> </u>	
•	
Student loans	
report as priority claims	
\square Debts to pension or profit-sharing plans, and other similar debts	
■ Other. Specify Medical Bills	
	As of the date you file, the claim is: Check all that apply Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Debts to pension or profit-sharing plans, and other similar debts Type of None of the date you file, the claim is: Check all that apply Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Debts to pension or profit-sharing plans, and other similar debts Medical Services Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Debts to pension or profit-sharing plans, and other similar debts Cother. Specify Medical Bills Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts

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Case number (if know) Debtor 1 Tina M. Brasher 4.1 Schnuck's \$172.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 11420 Lackland Rd Saint Louis, MO 63146 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Credit Extension ☐ Yes 4.1 **UW Health Physicians** \$397.00 Last 4 digits of account number 5 Nonpriority Creditor's Name Attn: Bankruptcy Dept. When was the debt incurred? 7974 UW Health Court Middleton, WI 53562-5531 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Medical Bills ☐ Yes 4.1 Verizon Wireless \$1.372.00 6 Last 4 digits of account number Nonpriority Creditor's Name Attn: Bankruptcy Dept. When was the debt incurred? PO Box 26055 Minneapolis, MN 55426 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Utilities ☐ Yes

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Case number (if know) Debtor 1 Tina M. Brasher 4.1 World Financial Network Bank \$536.00 Last 4 digits of account number Nonpriority Creditor's Name 4590 E. Broad St. When was the debt incurred? Columbus, OH 43213 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Credit Card Purchases ☐ Yes Part 3: List Others to Be Notified About a Debt That You Already Listed 5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page. Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.10 of (Check one): **ECMC** ☐ Part 1: Creditors with Priority Unsecured Claims 111 Washington Avenue 1400 Part 2: Creditors with Nonpriority Unsecured Claims Minneapolis, MN 55401 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Equifax Line 4.4 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims PO Box 740256 Part 2: Creditors with Nonpriority Unsecured Claims Atlanta, GA 30374 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Experian Line 4.4 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims PO Box 4500 Part 2: Creditors with Nonpriority Unsecured Claims Allen, TX 75013 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? IC System Line 4.1 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 444 Highway 96 East Part 2: Creditors with Nonpriority Unsecured Claims PO Box 64378 Saint Paul, MN 55164-0378 Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address **Jefferson Capital Systems** Line 4.16 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims Attn: Bankruptcy Dept. Part 2: Creditors with Nonpriority Unsecured Claims 16 Mcleland Rd Saint Cloud, MN 56303 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? **MCA Management Company** Line 4.14 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims Attn: Bankruptcy Dept. Part 2: Creditors with Nonpriority Unsecured Claims **PO Box 480** High Ridge, MO 63049 Last 4 digits of account number

On which entry in Part 1 or Part 2 did you list the original creditor?

Name and Address
On which entry in Part 1 of Midland Funding, LLC
Line 4.8 of (Check one):

Part 1: Creditors with Priority Unsecured Claims

2365 Northside Drive, Suite 300

Attn: Bankruptcy Dept.

Part 2: Creditors with Nonpriority Unsecured Claims

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Case number (if know) Debtor 1 Tina M. Brasher San Diego, CA 92108 Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address Midland Funding, LLC Line 4.3 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims Attn: Bankruptcy Dept. ■ Part 2: Creditors with Nonpriority Unsecured Claims 2365 Northside Drive, Suite 300 San Diego, CA 92108 Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address Mutual Management Services Co., Line 4.6 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims ■ Part 2: Creditors with Nonpriority Unsecured Claims 7177 Crimson Ridge Dr., Suite 10 PO Box 8740 Rockford, IL 61126-6235 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? **Portfolio Recovery Associates** Line 4.8 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims Attn: Bankruptcy Dept. Part 2: Creditors with Nonpriority Unsecured Claims 120 Corporate Blvd., Ste 100 Norfolk, VA 23502 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? **Portfolio Recovery Associates** Line 4.17 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims Attn: Bankruptcy Dept. Part 2: Creditors with Nonpriority Unsecured Claims 120 Corporate Blvd., Ste 100 Norfolk, VA 23502 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? **Rockford Mercantile Agency** ☐ Part 1: Creditors with Priority Unsecured Claims Line 4.13 of (Check one): Attn: Bankruptcy Dept. Part 2: Creditors with Nonpriority Unsecured Claims 2502 S Alpine Rd Rockford, IL 61108 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? **Rockford Mercantile Agency** Line 4.11 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims Attn: Bankruptcy Dept. ■ Part 2: Creditors with Nonpriority Unsecured Claims 2502 S Alpine Rd Rockford, IL 61108 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? **Rockford Mercantile Agency** Line 4.12 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims Attn: Bankruptcy Dept. Part 2: Creditors with Nonpriority Unsecured Claims 2502 S Alpine Rd Rockford, IL 61108 Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address **State Collection Service** Line 4.15 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims Attn: Bankruptcy Dept. ■ Part 2: Creditors with Nonpriority Unsecured Claims PO Box 6250 Madison, WI 53701 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? State Collection Service Line 4.15 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims Attn: Bankruptcy Dept. ■ Part 2: Creditors with Nonpriority Unsecured Claims 2509 S Stoughton Road Madison, WI 53716 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? **TransUnion** Line 4.4 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims

Official Form 106 F/F

555 West Adams Street

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Debtor 1 Tina M. Brasher

Chicago, IL 60661

■ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total				
claims from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 0.00
				Total Claim
	6f.	Student loans	6f.	\$ 10,119.00
Total claims				
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount	6i.	\$ 16,119.00
		here.		
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 26,238.00
				,

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			311 1 UUC 23 01 30	
Fill in this infor	mation to identify your	case:		
Debtor 1	Tina M. Brasher			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with Name, Number	whom you have the , Street, City, State and ZIP (contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.2	•				
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.3					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.4					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.5					
	Name				_
	Number	Street			_
	City		State	ZIP Code	_

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		Docume	nt Page 30 d	of 58	
Fill in this	information to identify your	case:			
Debtor 1	Tina M. Brasher				
Debtor 2	First Name	Middle Name	Last Name		
(Spouse if, fili	ng) First Name	Middle Name	Last Name		
United Sta	ates Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case num (if known)	ber			☐ Check if this is an amended filing	
Officia	l Form 106H				
	lule H: Your Cod	lebtors		12/15	5
fill it out, a your name		boxes on the left. Attach). Answer every question.	the Additional Page t	tion. If more space is needed, copy the Additional Pag to this page. On the top of any Additional Pages, write e as a codebtor.	
■ No	S				
	hin the last 8 years, have yo na, California, Idaho, Louisiana			ry? (Community property states and territories include nington, and Wisconsin.)	
	. Go to line 3. s. Did your spouse, former spo	use, or legal equivalent live	with you at the time?		
in line Form	2 again as a codebtor only	if that person is a guarant	or or cosigner. Make	or if your spouse is filing with you. List the person sho sure you have listed the creditor on Schedule D (Office 06G). Use Schedule D, Schedule E/F, or Schedule G to	cial
	Column 1: Your codebtor Name, Number, Street, City, State and Z	IP Code		Column 2: The creditor to whom you owe the del Check all schedules that apply:	ot
3.1				☐ Schedule D. line	
	Name			Schedule E/F, line	
				☐ Schedule G, line	
	Number Street City	State	ZIP Code	_	
3.2				☐ Schedule D, line	—
	Name			☐ Schedule E/F, line ☐ Schedule G, line ☐	
-	Number Street			_	
	City	State	ZIP Code		

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Fill	in this information to identify your c	200.				1					
	otor 1 Tina M. Bras										
	otor 2 puse, if filing)										
Uni	ted States Bankruptcy Court for the	: NORTHERN DISTRIC	CT OF ILLINOIS								
(If kr	se number nown)		-				amende uppleme	Ū		petition chapter	r
	fficial Form 106I					MM	/ DD/ Y	YYY			
S	chedule I: Your Inc	ome								12/	15
sup spo atta	as complete and accurate as possiblying correct information. If you use. If you are separated and you ch a separate sheet to this form. Describe Employment	are married and not filing wi	ng jointly, and your sp ith you, do not include	oouse i e infori	s liv nati	ing with yo on about yo	ou, inclu our spo	ide inform use. If mo	nation a ore spa	about your ice is needed	١,
1.	Fill in your employment information.		Debtor 1			D	ebtor 2	or non-fil	ing sp	ouse	
	If you have more than one job, attach a separate page with	Employment status	■ Employed] Emplo	yed			
	information about additional		☐ Not employed				☐ Not er	nployed			
	employers.	Occupation	Hospice Nurse								
	Include part-time, seasonal, or self-employed work.	Employer's name	OSF Home Care								
	Occupation may include student or homemaker, if it applies.	Employer's address	800 N.E. Glen Oa Peoria, IL 61603	k Ave	nue						
		How long employed t	here?								
Par	t 2: Give Details About Mor	nthly Income									
	mate monthly income as of the duse unless you are separated.	ate you file this form. If	you have nothing to rep	ort for	any	line, write \$6	0 in the	space. Inc	lude yo	our non-filing	
	u or your non-filing spouse have mo e space, attach a separate sheet to		ombine the information	for all e	empl	oyers for tha	at persoi	n on the lir	ies bel	ow. If you nee	d
						For Debto	or 1	For Deb			
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$	4,06	66.31	\$		N/A	
3.	Estimate and list monthly overt	ime pay.		3.	+\$		0.00	+\$		N/A	

Calculate gross Income. Add line 2 + line 3.

N/A

\$

4,066.31

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Deb	tor 1	Tina M. Brasher		(Case	number (if know	7)				
					Fo	r Debtor 1			Debtor filing s		
	Сор	y line 4 here	4.		\$_	4,066.3	1	\$		N/A	<u> </u>
5.	List	all payroll deductions:									
	5a. 5b. 5c. 5d. 5e. 5f.	Tax, Medicare, and Social Security deductions Mandatory contributions for retirement plans Voluntary contributions for retirement plans Required repayments of retirement fund loans Insurance Domestic support obligations	5a 5b 5d 5d 5e 5f.). ;. d.) .	\$	740.1 0.0 0.0 0.0 355.2 0.0	0 0 0 3	\$ \$ \$ \$		N/A N/A N/A N/A N/A	- - - - -
	5g.	Union dues	59		\$_	0.0	_	\$		N/A	_
	5h.	Other deductions. Specify:	5h	1.+	\$	0.0	0	+ \$		N/A	<u> </u>
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$_	1,095.3	9	\$		N/A	<u>.</u>
7.	Cald	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$_	2,970.9	2	\$		N/A	<u>.</u>
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a	1	\$	0.0	0	\$		N/A	
	8b.	Interest and dividends	8b		\$-	0.0		\$		N/A	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	80		\$_	0.0		\$		N/A	_
	8d. 8e.	Unemployment compensation Social Security	8d 8e		\$_ \$	0.0	_	\$		N/A N/A	_
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.	•	\$_	0.0	0	\$		N/A	<u> </u>
	8g. 8h.	Pension or retirement income Other monthly income. Specify: Tax Refund	8g). 1.+	\$_ \$	0.0 200.0		\$ + \$		N/A N/A	_
9.		all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	Г	\$	200.0	_	\$		N/	_
10.		culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$_		3,170.92 +	\$_		N/A	= \$ _	3,170.92
11.	Inclu othe	e all other regular contributions to the expenses that you list in Schedule ade contributions from an unmarried partner, members of your household, your r friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not a cify:	depe			•			chedule 11.		0.00
12.		the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certaines							12.	\$	3,170.92
13.	Do y	ou expect an increase or decrease within the year after you file this form No.	?						·	Combi month	ned ly income
	$\overline{}$	Yes Explain:									Ī

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-···						1		
FIII	n this informa	tion to identify yo	our case:					
Debt	tor 1	Tina M. Bras	sher				eck if this is:	
Debt	tor 2						An amended filing	ving postpetition chapter
	ouse, if filing)						13 expenses as of	
Unite	ed States Bankr	uptcy Court for the	: NORTH	ERN DISTRICT OF ILLIN	OIS		MM / DD / YYYY	
Case	e number							
	nown)							
Of	ficial Fo	rm 106J				•		
		J: Your	Fyner	1888				12/1
Be a info nun	as complete a rmation. If m nber (if know	and accurate as ore space is ne n). Answer eve	s possible eded, atta ry questio	. If two married people ar ich another sheet to this				or supplying correct
Part 1.	ls this a join	ibe Your House it case?	enoia					
	■ No. Go to							
			in a separ	ate household?				
	□ N							
			st file Offici	al Form 106J-2, Expenses	for Separate House	ehold of De	btor 2.	
2.	Do you have	e dependents?	□ No					
۷.	•	•			Danis danika salat		Dan and and	Dana danan dant
	Do not list Do Debtor 2.	eptor 1 and	Yes.	Fill out this information for each dependent	Dependent's relat Debtor 1 or Debto		Dependent's age	Does dependent live with you?
	Do not state	the						□ No
	dependents	names.			Daughter		_ 1	■ Yes
					_			□ No
					Son		10	Yes
					Son		40	□ No
					Son			■ Yes □ No
					Daughter		19	■ Yes
3.	Do vour exp	enses include	_	NI.	Daugittei			■ Yes
0.	expenses of	f people other t	han $_{\square}$	No Yes				
Part		ate Your Ongoi		ly Expenses uptcy filing date unless y	ou are using this f	orm as a s	supplement in a Cha	opter 13 case to report
exp	enses as of a licable date.	date after the	bankrupto	y is filed. If this is a supp	elemental Schedule	e J, check	the box at the top o	f the form and fill in the
Incl	ude expense	s paid for with	non-cash	government assistance i	f you know			
	value of such icial Form 10		d have inc	cluded it on Schedule I: \	our Income		Your exp	enses
4.		r home owners ad any rent for th		ses for your residence. I or lot.	nclude first mortgag	e 4.	\$	1,222.00
	If not includ	ed in line 4:						
	4a. Real e	state taxes				4a.	\$	0.00
		rty, homeowner's	s, or renter	's insurance		4b.	·	0.00
				upkeep expenses		4c.	:	100.00
5		owner's associat		dominium dues our residence, such as ho	mo oquity loose	4d. 5	·	0.00

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ebtor 1 T	ina M. Brasher	Case number (if known)	
. Utilities			
	lectricity, heat, natural gas	6a. \$	225.00
	Vater, sewer, garbage collection	6b. \$	150.00
	elephone, cell phone, Internet, satellite, and cable services	6c. \$	310.00
	Other. Specify:	6d. \$	0.00
	nd housekeeping supplies		
		·	400.00
	are and children's education costs	8. \$	0.00
	g, laundry, and dry cleaning	9. \$	45.00
	al care products and services	10. \$	40.00
	I and dental expenses	11. \$	0.00
	ortation. Include gas, maintenance, bus or train fare.	12. \$	165.00
	nclude car payments.	13. \$	
	inment, clubs, recreation, newspapers, magazines, and books	· —	20.00
	ble contributions and religious donations	14. \$	0.00
5. Insuran			
	nclude insurance deducted from your pay or included in lines 4 or 20.	150 ¢	0.00
	ife insurance	15a. \$	0.00
	lealth insurance	15b. \$	0.00
	ehicle insurance	15c. \$	75.00
	Other insurance. Specify:	15d. \$	0.00
	Do not include taxes deducted from your pay or included in lines 4 or 2		
Specify:		16. \$	0.00
	nent or lease payments:	47a ¢	0.00
	car payments for Vehicle 1	17a. \$	0.00
	car payments for Vehicle 2	17b. \$	0.00
	Other. Specify:	17c. \$	0.00
	Other. Specify:	17d. \$	0.00
	ayments of alimony, maintenance, and support that you did not re		0.00
	ed from your pay on line 5, Schedule I, Your Income (Official Form		
_	payments you make to support others who do not live with you.	\$	0.00
Specify:		19.	
	eal property expenses not included in lines 4 or 5 of this form or of		0.00
	fortgages on other property	20a. \$	0.00
	eal estate taxes	20b. \$	0.00
	roperty, homeowner's, or renter's insurance	20c. \$	0.00
	faintenance, repair, and upkeep expenses	20d. \$	0.00
20e. H	lomeowner's association or condominium dues	20e. \$	0.00
. Other: S	Specify:	21. +\$	0.00
Calacila			
	Ite your monthly expenses		0.750.00
	d lines 4 through 21.	\$	2,752.00
22b. Co	py line 22 (monthly expenses for Debtor 2), if any, from Official Form 1	06J-2 \$	
22c. Ad	d line 22a and 22b. The result is your monthly expenses.	\$	2,752.00
Calcula	ato your monthly not income		
	te your monthly net income. Copy line 12 (your combined monthly income) from Schedule I.	23a. \$	2 470 00
		·	3,170.92
23b. C	copy your monthly expenses from line 22c above.	23b\$	2,752.00
220 0	Libtract your monthly expenses from your monthly income		
	ubtract your monthly expenses from your monthly income. he result is your <i>monthly net income</i> .	23c. \$	418.92
11	ne result is your <i>monthly net income.</i>	200. [*	
4. Do vo u	expect an increase or decrease in your expenses within the year	after you file this form?	
For exam	nple, do you expect to finish paying for your car loan within the year or do you ex		rease or decrease because c
	tion to the terms of your mortgage?	3 3 1 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7	
■ No.			
☐ Yes.	Explain here:		

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Fill in th	nis information to identify you	ır case:			
Debtor 1					
5 1	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if,		Middle Name	Last Name		
Linitad 9	States Bankruptcy Court for the	NORTHERN DISTRICT	OF ILLINOIS		
Officed C	states bankruptcy court for the.	NORTHERN DISTRICT	OI ILLINOIS		
Case nu	ımber				
(if known)				_	heck if this is an nended filing
				ai	nended ming
Officia	al Form 106Dec				
			D.14. J. O.1		
Dec	laration About	an individual	Debtor's Sci	nedules	12/15
	arried people are filing togeth				
	r both. 18 U.S.C. §§ 152, 1341		cruptcy case can result in	n fines up to \$250,000, or imprisc	onment for up to 20
Dio	d you pay or agree to pay son	neone who is NOT an attor	ney to help you fill out ba	ankruptcy forms?	
	No				
П	Yes. Name of person			Attach Bankruptcy Petition	on Prenarer's Notice
	Tes. Name of person			Declaration, and Signatu	
	der penalty of perjury, I declar	re that I have read the sum	mary and schedules filed	l with this declaration and	
tila	tilley are true and correct.				
X	/s/ Tina M. Brasher		X		
	Tina M. Brasher		Signature of D	Debtor 2	
	Signature of Debtor 1				
	Date May 15, 2017		Date		

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Fill	in this inforn	nation to identify you	r case:			
Deb	otor 1	Tina M. Brasher				
		First Name	Middle Name	Last Name		
	otor 2 use if, filing)	First Name	Middle Name	Last Name		
	-	nkruptcy Court for the:	NORTHERN DISTRICT O	OF ILL INOIS		
OIII	ieu Siales Dai	ikiupicy Court for the.	NORTHERN DISTRICT C	JI ILLINOIS		
	se number				_	Check if this is an mended filing
	ficial Fo		Affairs for Individ	duals Filing for B	ankruptcy	4/10
info num	rmation. If m	ore space is needed, n). Answer every que	attach a separate sheet to stion.	this form. On the top of an	equally responsible for sup y additional pages, write you	
12an 1.		r current marital statu	arital Status and Where You	Lived Before		
	_	ourrent maritar state				
	■ Married■ Not mar	ried				
2.	During the la	ast 3 years, have you	lived anywhere other than	where you live now?		
	■ No □ Yes. Lis	t all of the places you I	ived in the last 3 years. Do no	ot include where you live now	ı.	
	Debtor 1 Pr	ior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
3. state					ity property state or territory ico, Texas, Washington and W	
	■ No □ Yes. Ma	ike sure you fill out <i>Scl</i>	hedule H: Your Codebtors (Of	ficial Form 106H).		
Par	t 2 Explai	n the Sources of You	ır Income	,		
4.	Fill in the tota	I amount of income yo	nployment or from operatin u received from all jobs and a have income that you receive	all businesses, including part		ndar years?
	□ No ■ Yes. Fill	in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
	•	of current year until d for bankruptcy:	■ Wages, commissions, bonuses, tips	\$18,767.58	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business		☐ Operating a business	

Official Form 107

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				Debtor 1		Debtor 2		
				Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of ince Check all that ap		Gross income (before deductions and exclusions)
	or last caler anuary 1 to	ndar year: December	31, 2016)	■ Wages, commissions, bonuses, tips	\$43,157.74	☐ Wages, combonuses, tips	missions,	
				☐ Operating a business		☐ Operating a b	ousiness	
		dar year be December		■ Wages, commissions, bonuses, tips	\$32,298.24	☐ Wages, complete Donuses, tips	missions,	
				☐ Operating a business		☐ Operating a b	ousiness	
	and other winnings. List each	public bene If you are fil	fit payments; ing a joint cas he gross inco	ner that income is taxable. Exa pensions; rental income; inter- se and you have income that y name from each source separat	est; dividends; money collector received together, list it constituted together.	eted from lawsuits; in only once under De	royalties; and btor 1.	
				Debtor 1		Debtor 2		
				Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of inco		Gross income (before deductions and exclusions)
Pa	rt 3: Lis	t Certain Pa	yments You	Made Before You Filed for I	Bankruptcy			
6.	□ No.	Neither De individual puring the No. Yes * Subject	90 days before Go to line 7 List below epaid that cround include to adjustmen	es debts primarily consumer bettor 2 has primarily consumer personal, family, or household pre you filed for bankruptcy, die cach creditor to whom you paireditor. Do not include payment payments to an attorney for the ton 4/01/19 and every 3 years or both have primarily consumer you filed for bankruptcy, die	Imer debts. Consumer debt d purpose." d you pay any creditor a total d a total of \$6,425* or more its for domestic support obligations bankruptcy case. Is after that for cases filed on mer debts.	of \$6,425* or more pay ations, such as chi	e? ments and thild support a	ne total amount you nd alimony. Also, do
		■ No.	Go to line 7		and a second a second a second a second	1. 4000 01 1110101		
		☐ Yes	List below e	each creditor to whom you pair ments for domestic support of this bankruptcy case.				
	Creditor	's Name and	d Address	Dates of payme	nt Total amount	Amount you still owe	Was this p	payment for

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Debto	Tina M. Brasher	Document	Page 38 of 58	} se number (<i>if known</i>)		
<i>In</i> of a	fithin 1 year before you filed for bankrup siders include your relatives; any general p which you are an officer, director, person i business you operate as a sole proprietor. imony.	partners; relatives of any gent on control, or owner of 20%	eneral partners; partners or more of their voting	erships of which yog securities; and a	u are a genera ny managing a	al partner; corporations gent, including one for
	No Yes. List all payments to an insider.					
lr	nsider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment
in	lithin 1 year before you filed for bankrup sider? clude payments on debts guaranteed or co		ayments or transfer a	any property on a	ccount of a de	ebt that benefited an
□ Ir	Yes. List all payments to an insider nsider's Name and Address	Dates of payment	Total amount	Amount you	Reason for	this payment
		, , , , , , , , , , , , , , , , , , ,	paid	still owe	Include cred	
■	odifications, and contract disputes. No Yes. Fill in the details. Case title	Nature of the case	Court or agency	., ,	Status of th	e case
C	Case number		Council agono,			
T	GMAT Legal Title Trust 2014-1 v. Fina Brasher et al. 2016 CH 794	Foreclosure	Winnebago Co Court 400 W State St Rockford, IL 61	- -	■ Pending □ On appe □ Conclud	
	Vithin 1 year before you filed for bankrup heck all that apply and fill in the details below. No. Go to line 11.		perty repossessed, f	oreclosed, garnis	shed, attached	I, seized, or levied?
	_					
C	Creditor Name and Address	Describe the Property	y	Date		Value of the property
		Explain what happen	ed			
	lithin 90 days before you filed for bankruccounts or refuse to make a payment be No Yes. Fill in the details.			nancial institution	, set off any a	mounts from your
	Creditor Name and Address	Describe the action the	ne creditor took	Date	action was	Amount
				taker	1	

12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?

No

☐ Yes

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Case number (if known) Document Debtor 1 Tina M. Brasher

Pa	rt 5: List Certain Gifts and Contributions			
13.	Within 2 years before you filed for bankrupto ■ No □ Yes. Fill in the details for each gift.	cy, did you give any gifts with a total value of more t	han \$600 per person	?
	Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value
	Person to Whom You Gave the Gift and Address:			
14.	■ No	cy, did you give any gifts or contributions with a tota	al value of more than	\$600 to any charity?
	Yes. Fill in the details for each gift or contributions to charities that tota more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)		Dates you contributed	Value
Pa	rt 6: List Certain Losses			
15.	Within 1 year before you filed for bankrupto; or gambling? No Yes. Fill in the details.	y or since you filed for bankruptcy, did you lose any	thing because of the	ft, fire, other disaster,
	how the loss occurred Inc	scribe any insurance coverage for the loss clude the amount that insurance has paid. List pending turance claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property lost
Pa	rt 7: List Certain Payments or Transfers			
16.	consulted about seeking bankruptcy or prep Include any attorneys, bankruptcy petition prep	y, did you or anyone else acting on your behalf pay oparing a bankruptcy petition? arers, or credit counseling agencies for services require		rty to anyone you
	No■ Yes. Fill in the details.			
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
	Springer Law Firm 2222 E State St, Suite 107 Rockford, IL 61104	\$690	5/2017	\$690.00
	001DebtorCC 378 Summit Ave. Jersey City, NJ 07306 www.debtorcc.org	\$14.95	5/2017	\$14.95
17.	Within 1 year before you filed for bankrupto promised to help you deal with your credito Do not include any payment or transfer that you		or transfer any prope	rty to anyone who
	■ No □ Yes. Fill in the details.			
	Person Who Was Paid Address	Description and value of any property transferred	Date payment or transfer was made	Amount of payment

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Debtor 1 Tina M. Brasher

18.	Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.							
	No Yes. Fill in the details.							
	Person Who Received Transfer Address	Description and property transfer		payme	ibe any property or ents received or debts	Date tra made	nsfer was	
	Person's relationship to you			paid ir	n exchange			
19.	Within 10 years before you filed for bankrup beneficiary? (These are often called asset-pro		ny property to a	self-settle	d trust or similar device	of which y	ou are a	
	■ No □ Yes. Fill in the details.							
	Name of trust	Description and	value of the pro	perty trans	ferred	Date Tra	ınsfer was	
Da	4 O. List of Cartain Financial Associate Inc	atuumanta Safa Danaa	it Dayso and Ct	orogo Unit	-	maue		
Pal	List of Certain Financial Accounts, Ins	struments, Safe Depos	it Boxes, and St	orage Unit	S			
20.	Within 1 year before you filed for bankruptcy sold, moved, or transferred?	y, were any financial a	ccounts or instr	uments he	ld in your name, or for y	our benefi	t, closed,	
	Include checking, savings, money market, of houses, pension funds, cooperatives, associated in the cooperative of the cooperati				t; shares in banks, cred	t unions, b	orokerage	
	No Yes. Fill in the details.							
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	• • • • • • • • • • • • • • • • • • • •		Date account was closed, sold, moved, or transferred		st balance closing or transfer	
21.	Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?							
	■ No □ Yes. Fill in the details.							
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had ac Address (Number, State and ZIP Code)		Describe	the contents	Do yo	u still it?	
22.	Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?							
	■ No □ Yes. Fill in the details.							
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)		Describe	the contents	Do yo	ou still it?	
Pai	rt 9: Identify Property You Hold or Control	for Someone Else						
23.			lude any proper	ty you borr	owed from, are storing	for, or hold	d in trust	
	■ No □ Yes. Fill in the details.							
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the pro (Number, Street, City, Code)		Describe	the property		Value	
Pai	rt 10: Give Details About Environmental Info	ormation						
For	the purpose of Part 10, the following definition	ons apply:						

Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or

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Case number (if known) Document

Tina M. Brasher Debtor 1

> toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.

- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance,

	hazardous material, pollutant, contaminant, or similar term.							
Rep	ort a	III notices, releases, and proceedings tha	at you know about, regardless of wher	the	y occurred.			
24.	Has	any governmental unit notified you that	you may be liable or potentially liable	und	ler or in violation of an environme	ental law?		
		No						
	☐ Yes. Fill in the details.							
	Name of site Address (Number, Street, City, State and ZIP Code)		Governmental unit Address (Number, Street, City, State and ZIP Code)	t	Environmental law, if you know it	Date of notice		
25.	Hav	e you notified any governmental unit of	any release of hazardous material?					
		No Yes. Fill in the details.						
		me of site dress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)		Environmental law, if you know it	Date of notice		
26.	Hav	re you been a party in any judicial or adm	ninistrative proceeding under any envi	ronn	nental law? Include settlements a	nd orders.		
		No						
	C ₂	Yes. Fill in the details. se Title	Court or agency	Not	ture of the case	Status of the		
		se Number	Name Address (Number, Street, City, State and ZIP Code)	Nat	are of the case	case		
Par	t 11:	Give Details About Your Business or	Connections to Any Business					
27.	Wit	hin 4 years before you filed for bankrupt	cy, did you own a business or have an	y of	the following connections to any	business?		
		☐ A sole proprietor or self-employed in	n a trade, profession, or other activity,	eith	er full-time or part-time			
		☐ A member of a limited liability comp	any (LLC) or limited liability partnersh	ip (L	LP)			
		☐ A partner in a partnership						
		☐ An officer, director, or managing executive of a corporation						
	☐ An owner of at least 5% of the voting or equity securities of a corporation							
		No. None of the above applies. Go to P	art 12.					
		Yes. Check all that apply above and fill	in the details below for each business	3.				
		siness Name dress	Describe the nature of the business		Employer Identification number			
		mber, Street, City, State and ZIP Code)	Name of accountant or bookkeeper		Do not include Social Security number or ITIN.			
28.		hin 2 years before you filed for bankrupt citutions, creditors, or other parties.	cy, did you give a financial statement t	o an	Dates business existed your business? Inclu	de all financial		
		No						
		Yes. Fill in the details below.						
	Ad	me dress mber, Street, City, State and ZIP Code)	Date Issued					
	Na Ad	me dress	Date Issued					

Part 12: Sign Below

I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers Statement of Financial Affairs for Individuals Filing for Bankruptcy Official Form 107 page 6 Case 17-81158 Doc 1 Filed 05/15/17 Entered 05/15/17 15:23:32 Desc Main Page 42 of 58
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Debtor 1 Tina M. Brasher

are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

/s/ Tina M. Brasher Tina M. Brasher			
		Signature of Debtor 2	
Signa	ture of Debtor 1		
Date	May 15, 2017	Date	
Did yo	u attach additional pages to Your	Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official For	rm 107)?
No			
□ Yes	3		
Did yo	u pay or agree to pay someone wl	o is not an attorney to help you fill out bankruptcy forms?	
No			
☐ Yes	s. Name of Person Attach the	Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 11st	9).

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation	
\$245	filing fee	
\$75	administrative fee	
+ \$15	trustee surcharge	
\$335	total fee	

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankruptcy/BankruptcyResources/ApprovedCredit
AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 17-81158 Doc 1 Filed 05/15/17 Entered 05/15/17 15:23:32 Desc Main Document Page 47 of 58

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Northern District of Illinois

In	re	Tina M. Brash	er		Case No.	
			-	Debtor(s)	Chapter	13
		DIS	CLOSURE OF CO	OMPENSATION OF ATTORN	EY FOR DI	EBTOR(S)
1.	coi	mpensation paid to	me within one year before	r. P. 2016(b), I certify that I am the attorney fre the filing of the petition in bankruptcy, or amplation of or in connection with the bankrup	greed to be paid	to me, for services rendered or to
		For legal service	es, I have agreed to accept	t	\$	4,000.00
		Prior to the filin	g of this statement I have	received	\$	690.00
					\$	3,310.00
2.	Th		mpensation paid to me wa			
		Debtor	☐ Other (specify):			
3.	Th	e source of compe	nsation to be paid to me is	s:		
		Debtor	☐ Other (specify):			
4.		I have not agreed		osed compensation with any other person unle	ess they are mem	bers and associates of my law firm
		I have agreed to	share the above-disclosed	compensation with a person or persons who of the names of the people sharing in the con	are not members	or associates of my law firm. A
5.	In	return for the above	ve-disclosed fee, I have ag	greed to render legal service for all aspects of	the bankruptcy of	ease, including:
	b. c.	Preparation and fi Representation of [Other provisions Negotiatio reaffirmati	iling of any petition, scheo the debtor at the meeting as needed] ons with secured credition agreements and a	and rendering advice to the debtor in determination, statement of affairs and plan which may of creditors and confirmation hearing, and an alternation to reduce to market value; exempt pplications as needed; preparation and an on household goods.	y be required; ny adjourned hea tion planning;	rings thereof;
6.	Ву	Represent		sclosed fee does not include the following ser n any dischargeability actions, judicial J.		es, relief from stay actions or
				CERTIFICATION		
this		ertify that the foreg kruptcy proceedin		nent of any agreement or arrangement for pay	ment to me for r	epresentation of the debtor(s) in
	May	/ 15, 2017		/s/ Daniel A. Springe	r	
'	Date			Daniel A. Springer		
				Signature of Attorney Springer Law Firm		
				2222 E State St		
				Suite 107		
				Rockford, IL 61104		
				815.312.4725		
				dspringerlaw@gmail	.com	
				Name of law firm		

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

(Court-Approved Retention Agreement, Use for cases filed on or after September 19, 2016)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtor and the attorney that conflicts with this agreement is void.

A. BEFORE THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

THE ATTORNEY AGREES TO:

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule, and explain how and when the attorney's fees and the trustee's fees are determined and paid.

- 3. Personally review with the debtor and sign the completed petition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.
- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.
- 6. Advise the debtor of the need to maintain appropriate insurance.

B. AFTER THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly or, if required payments cannot be made, notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and, when the case is called, for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce).
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

THE ATTORNEY AGREES TO:

- 1. Advise the debtor of the requirement to attend the meeting of creditors and notify the debtor of the date, time, and place of the meeting.
- 2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.
- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor, in advance, the role and identity of the other attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.
- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Prepare, file, and serve a notice of conversion to Chapter 7, pursuant to § 1307(a) of the Bankruptcy Code and Local Bankruptcy Rule 1017-1.
- 17. Provide any other legal services necessary for the administration of the case.

C. TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3. If the case is converted to a case under Chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the Chapter 7 case for any unpaid fees and expenses, pursuant to § 726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.

D. RETAINERS AND PREVIOUS PAYMENTS

- 1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.
 - The attorney seeks to have the retainer received by the attorney treated as an advance payment retainer, which allows the attorney to take the retainer into income immediately. The attorney hereby provides the following further information and representations:
 - (a) The special purpose for the advance payment retainer and why it is advantageous to the debtor is as follows:
 - (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
 - (c) The retainer is a flat fee for the services to be rendered during the Chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;

- (d) Any portion of the retainer that is not earned or required for expenses will be refunded to the client; and
- (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the Chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation, the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing, including the date(s) any such fees were paid.

E. CONDUCT AND DISCHARGE

- 1. Improper conduct by the attorney. If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. Improper conduct by the debtor. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. Discharge of the attorney. The debtor may discharge the attorney at any time.

[Remaining page intentionally left blank.]

F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

 Any attorney retained to represent a debt representing the debtor on all matters arising For all of the services outlined above, the att 	g in the case unless otherwise ordered by the court.				
2. In addition, the debtor will pay the filing \$\frac{310.00}{.}	fee in the case and other expenses of				
3. Before signing this agreement, the attorn	ney received \$ 690.00				
toward the flat fee, leaving a balance due	e of \$ 3310.00; and \$ 310.00 for expenses,				
leaving a balance due of \$0					
4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, he time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.					
Date: 5/15/2017					
Signed: Oina Brasher					
D1. ()	The Control of the Co				
Debtor(s)	Attorney for the Debtor(s)				
Do not sign this agreement if the amounts as	re blank.				

United States Bankruptcy Court Northern District of Illinois

In re	Tina M. Brasher		Case No.	
		Debtor(s)	Chapter 13	3
	VI	ERIFICATION OF CREDITOR M	1ATRIX	
		Number of	f Creditors:	36
	The above-named Debtor(s) (our) knowledge.) hereby verifies that the list of credit	tors is true and cor	rect to the best of my

AT&T PO Box 6416 Carol Stream, IL 60197

Chase Bank USA Attn: Bankruptcy Dept. PO Box 15298 Wilmington, DE 19850

Citizens Finance Attn: Bankruptcy Dept. 6457 N 2nd St Loves Park, IL 61111

Codilis & Associates 15W030 N. Frontage Road Burr Ridge, IL 60527

Cortrust Bank PO Box 7030 Mitchell, SD 57301

ECMC 111 Washington Avenue 1400 Minneapolis, MN 55401

Equifax PO Box 740256 Atlanta, GA 30374

Experian PO Box 4500 Allen, TX 75013

GMAT Legal Title Trust 2014-1 60 Livingston Avenue EP-MN-WS3D Saint Paul, MN 55107

Harlem Consolidated School District 8605 N. 2nd Street Machesney Park, IL 61115

Heights Finance Corporation Attn: Bankruptcy Dept. 5301 E. State Street #111 Rockford, IL 61108

HSBC Bank Attn: Bankruptcy Dept. PO Box 9 Buffalo, NY 14240

IC System
444 Highway 96 East
PO Box 64378
Saint Paul, MN 55164-0378

Illinois Department of Revenue Attn: Bankruptcy Dept. PO Box 64338 Chicago, IL 60664

Illinois Department of Revenue Lien Unit PO Box 19035 Springfield, IL 62794

Illinois Tollway Attn: Bankruptcy Dept. 2700 Ogden Ave Downers Grove, IL 60515

Jefferson Capital Systems Attn: Bankruptcy Dept. 16 Mcleland Rd Saint Cloud, MN 56303

MCA Management Company Attn: Bankruptcy Dept. PO Box 480 High Ridge, MO 63049

Midland Funding, LLC Attn: Bankruptcy Dept. 2365 Northside Drive, Suite 300 San Diego, CA 92108 Mutual Management Services Co., LLC 7177 Crimson Ridge Dr., Suite 10 PO Box 8740 Rockford, IL 61126-6235

Navient PO Box 9635 Wilkes Barre, PA 18773

Newcomb Eye Center 11710 Main Street #2 Roscoe, IL 61073

OSF St. Anthony Med Center Attn: Bankruptcy Dept. 5510 East State St. Rockford, IL 61108-2381

Portfolio Recovery Associates Attn: Bankruptcy Dept. 120 Corporate Blvd., Ste 100 Norfolk, VA 23502

Rock River Water Reclamation Attn: Bankruptcy Dept. 3333 Kishwaukee St. Rockford, IL 61109

Rockford Health System Attn: Bankruptcy Dept. 2400 N Rockton Ave Rockford, IL 61103

Rockford Mercantile Agency Attn: Bankruptcy Dept. 2502 S Alpine Rd Rockford, IL 61108

Rushmore Loan Management Services PO Box 52708
Irvine, CA 92619

Schnuck's 11420 Lackland Rd Saint Louis, MO 63146 State Collection Service Attn: Bankruptcy Dept. PO Box 6250 Madison, WI 53701

State Collection Service Attn: Bankruptcy Dept. 2509 S Stoughton Road Madison, WI 53716

TransUnion 555 West Adams Street Chicago, IL 60661

UW Health Physicians Attn: Bankruptcy Dept. 7974 UW Health Court Middleton, WI 53562-5531

Verizon Wireless Attn: Bankruptcy Dept. PO Box 26055 Minneapolis, MN 55426

Winnebago County Circuit Court 400 W State St 2016 CH 794 Rockford, IL 61101

World Financial Network Bank 4590 E. Broad St. Columbus, OH 43213